

2667
T&T CORP

 TRANSMITTAL FORM <small>TRADEMARK OFFICE</small>		Application Number	10/005,153
		Filing Date	12/07/2001
		First Named Inventor	Irwin Gerszberg
		Group Art Unit	2667
		Examiner Name	Yao, Kwang Bin
Total Number of Pages in this Submission	8	Attorney Docket Number	112813CON

Enclosures (check all that apply)

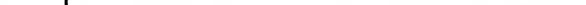
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Drawing(s) & Letter to Official Draftsman <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to the Commissioner <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> CD, Number of CDs <input checked="" type="checkbox"/> Additional enclosure(s) (please identify below)
RECEIVED AUG 30 2004 Technology Center 2600		
Auth. to Act in a Repr. Capacity		
Remarks Response to Official Action of 05/27/04		

CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	Customer Number - 26652	or <input type="checkbox"/> Correspondence address below
NAME	Samuel H. Dworetzky	
ADDRESS	AT&T CORP. Room 2A-207	
CITY	Bedminster	STATE
COUNTRY	United States of America	ZIP CODE
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Robert T. Canavan	Reg. #
TELEPHONE	908-707-1563	DATE
SIGNATURE	Robert T. Canavan	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage thereon as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 08/23/2004

Type or Printed Name	Robert T. Canavan		
Signature		Date	08/23/2004

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL <small>Patent Fees are subject to annual revision.</small>		<i>Complete If Known</i>	
		Application Number	10/005,153
		Filing Date	12/07/2001
		First Named Inventor	Irwin Gerszberg
		Examiner Name	Yao, Kwang Bin
		Group/Art Unit	2667
		Attorney Docket No.	112813CON
		AUG 30 2004 Technology Center 2600	

TOTAL AMOUNT OF PAYMENT

110

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745
Deposit Account Name AT&T CORP.

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

FEE CALCULATION**1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
1001	770	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	
1002	340	Design Filing Fee	
1004	770	Reissue Filing Fee	
1005	180	Provisional Filing Fee	

SUBTOTAL (1)

2. CLAIMS Filing Under 37CFR 1.53 (b)
 CPA Under 37CFR 1.53 (d)
 Amendment

Extra Claims	Fee from below	Fee Paid
Total - 20 =	X 18 =	
Ind. - 3 =	X 86 =	

Multiple Dependent Claims

Large Fee Code	Entity Fee(\$)	Fee Description
1202	18	Claims in excess of 20
1201	86	Independent Claims in excess of 3
1203	290	Multiple Dependent Claims
1204	86	** Reissue Independent claims over original patent
1205	18	** Reissue claims in excess of 20 and over original patent

** or number previously paid, if greater, for Reissues, see above

SUBTOTAL (2) 0**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
1051	130	Surcharge - late filing fee or oath	
1052	50	Surcharge - late provisional filing fee or cover sheet	
1053	130	Non-English specification	
1812	2520	For filing a request for reexamination	
1804*	920	Requesting publication of SIR prior to Examiner action	
1805*	1840	Requesting publication of SIR after Examiner action	
1251	110	Extension for response within first month	
1252	420	Extension for response within second month	
1253	950	Extension for response within third month	
1254	1480	Extension for response within fourth month	
1255	2010	Extension for response within fifth month	
1401	330	Notice of Appeal	
1402	330	Filing a brief in support of an appeal	
1403	290	Request for oral hearing	
1504	300	Publication fee for early, voluntary, or normal publication	
1452	110	Petition to revive - unavoidable	
1453	1330	Petition to revive - unintentional	
1501	1330	Utility Issue fee (or reissue)	
1602	480	Design Issue fee	
1460	130	Petitions to the Commissioner	
1807	50	Processing fee for provisional applications	
1808	180	Submission of Information Disclosure Statement	
8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	For each additional Invention to be examined (37 CFR 1.129(b))	
1801	770	Request for Continued Examination (RCE)	
1802	900	Request for expedited exam of a design application	
Other fee (specify): Statutory Disclaimer (37 CFR § 1.20 (d))			110

SUBTOTAL(3) 110**SUBMITTED BY**

Typed or Printed Name John E. Etchells

Complete (if applicable)

Reg. Number

Signature

Date

08/23/2004

Deposit Account User ID



Sample Form (03-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Gerszberg et al.

Application No. 10/005,153

RECEIVED

Filed: 12/07/2001

AUG 3 0 2004

Title: Hybrid Fiber Twisted Pair Local Loop
Network Service Architecture

Technology Center 2600

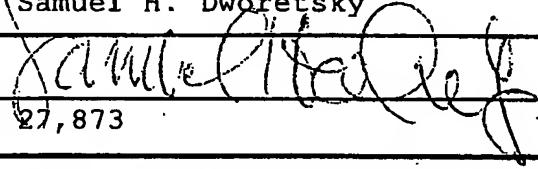
Attorney Docket No. 112813CON Art Unit: 2667

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Robert T. Canavan	37,592

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record

Name	Samuel H. Dworetzky		
Signature		Date	08/20/04
Registration Number	27,873	Telephone	(908) 532-1855

This form offers a sample or suggested format for an authorization of a practitioner who is not of record. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.